



Juvenile Law Commission

July 14, 2004

Commission Members Present

Katie Humphreys
Amy Karozos for Susan Carpenter
Pam Cline
Steve DeMougin
Bruce Donaldson
Roger Duvall
Ralph Foley
Justice Robert Rucker
Becky Bowman for Bob Marra
Viola Taliaferro
Robin Tew
Connie Windhorst

Commission Members Absent

Melvin Carraway
Chessie Smith-Hacker
Glenn Howard
Robert Kuzman
Larry Landis
David Long
James Payne
Diane WeissBradley

Staff Present

Micah Cox
Nikki Kincaid

Contract Staff Present

Laurie Elliott
Jim Hmurovich
Michelle Tennell

Guests

Janet Corson
Joseph Fistrovich
Bill Glick
Allison Wharry

Agency

JLC Chair
State Public Defender
DOC
FSSA
IJJTF
Scott County Prosecutor
House of Representatives
Indiana Supreme Court
IDOE
Monroe Circuit Court
ICJI
Parent Representative

Agency

Indiana State Police
Youth Representative
Senate
House of Representatives
Public Defender Council
Senate
Marion Superior Court, Juvenile Div.
Lake Co. Juvenile Court Probation

Agency

ICJI
ICJI

Agency

Youth Law T.E.A.M.
Staff
ICJI

Agency

Co-Chair of the IASR Subcommittee
IDOC
IN Juvenile Justice Task Force
IHHA

- I. Called to Order:** 10:45 a.m.
By: Katie Humphreys, Chair of Juvenile Law Commission.
- II. Minutes of June 16, 2004 meeting were distributed via e-mail and mail prior to meeting and distributed via handout for review.**
Motion to Approve: Rep. Foley
Second: Pam Cline
Minutes approved by consensus without changes or additions.
- III. JLC Subcommittee Reports**
- **Planning, Policy & Systems Development Subcommittee**
 - **Identification, Assessment & Service Referral Subcommittee**
 - **Information Sharing Subcommittee**
 - **Integrative Funding Subcommittee**

Chair recognized Nikki Kincaid. Ms. Kincaid gave the Commission members an overview of the agenda and handouts in their packets as well as an overview of the reporting format of the subcommittee chairs.

Chair recognized Allison Wharry, Co-Chair of the Planning, Policy & System Development Subcommittee (PPSD).

Ms. Wharry, speaking on behalf of her co-chair, Judge Steve David, and representing the PPCSD subcommittee, gave the commission members a snapshot of the work of the subcommittee to date. The subcommittee initially identified 37 topics for consideration. These were “whittled down” to 15-16 main topics. These topical issues were then ranked and classified based on which of the following categories they best fit: Jurisdiction, Waiver/Direct File, Representation/Juvenile Rights, Education/Special Education, and Systems Improvement.

The staff was then responsible for providing the subcommittee with a document prior to each meeting discussing each topic in a proscribed format decided upon by the subcommittee members. The format is: Issue/Recommendation, Background/Justification including applicable Case Law and Statutes, Positives/Support, Negatives/Opposition, Vote Results, Dissenting Opinions. Each issue would be discussed and voted upon. Based upon the vote, the issue would be STRONGLY RECOMMENDED (2/3rds Vote), RECOMMENDED (Majority Vote), NOTED (30% or More Vote), and NOT IDENTIFIED (<30% Vote) to the full Commission for consideration. A Dissenting Opinion requires a minimum of two dissenters to be documented.

The PPSD subcommittee has met twice and is scheduled to meet two more times. Five topics have been covered and voted on with seven more scheduled for discussion at the next meeting and the remaining five will be discussed at the final meeting. The final group of five topics will be “Systems Improvement Recommendations.”

Ms. Wharry concluded her presentation with an acknowledgement that with the strong staff support received by the subcommittee, they are assured they will get through all of their topics and make recommendations to the Commission within the proscribed time frame.

The Chair thanked Ms. Wharry for her work and recognized the other members of the subcommittee as well as staff for their well thought-out approach.

Chair recognized Janet Corson, Co-Chair of the Identification, Assessment and Service Referral (IASR) Subcommittee.

Ms. Corson, speaking on behalf of her co-chair, Judge Susan Henderson, as well as the IASR subcommittee began her presentation by acknowledging that there is a good cross-section of representation on this subcommittee both demographically and geographically. The subcommittee has held two meetings and has two meetings scheduled in August 2004. The first meeting consisted of the prioritization of the committee’s charges as well as assigning each subcommittee member with the task of identifying and attaining copies of screening and assessment tools for the subcommittee’s review. During the second meeting, a framework was developed of how the process should work with the goal of assuring that each child receives the services needed. Screening would always be provided at the first opportunity/contact with any system. This would then lead to a more intensive, appropriate assessment which would result in a service coordination plan, culminating in the evaluation of measurable outcomes. This would all be done in concert with the “family,” whoever they are. The partnership would build on the strengths of the family and assist them with the implementation of the services plan.

The barriers that were identified included capacity issues; however, the subcommittee remains committed to concentrating on its charge with the knowledge that the Integrative Funding committee will focus on the monetary issues. This subcommittee’s goal is to set up a framework with the idea that all systems will know what specific outcome they are working toward while recognizing the child’s and family’s needs should be the central focus. The framework will include recommendations regarding the use of common language among agencies while reducing the administrative overhead that all agencies face when giving multiple screenings and assessments to the same child/family. One proposal is that each community may adopt their own screening and assessment tools that all systems within that community would embrace. The plan is to give each county/community something they may all come together around, then each

may decide how services may be provided. The subcommittee hopes to at least make the identification process more streamlined and timely because without the identification, there is no way for the needed services to be provided.

The subcommittee will prepare a chart of all potential screening and assessment instruments it is recommending with a listing of the advantages and disadvantages of each. It is the hope of the subcommittee that making decisions about the tools to use at the local level may cause realization of financial benefits.

Chair opened floor for questions and comments.

Chair recognized Rep. Foley. Rep. Foley feels it is essential to have a common assessment tool at the local/county level, with the hope of a statewide buy-in.

Judge Taliaferro interjects that we must accept the fact that we (adults and systems) must be willing to change our way of doing business with regard to children needing services. We must not continue to be hampered by labels and there must be a policy requiring systems serving children to come together and place the focus where it should be, on the child, not on their label.

Janet Corson concluded by stating our most difficult if not most important task may be to make this whole idea attractive to people.

The Chair concurs and suggests that there may be the need for a session after the subcommittees make their recommendations during which we all “roll up our sleeves” and put together some type of a marketing plan for the subcommittees’ recommendations. We must identify who must be involved and incentivize those people to participate by using methods such as monetary incentives, rules and regulations and perhaps legislation to garner their support.

Jim Hmurovich summarized the presentation by stating that all systems need a consistent manner to identify children for screening process and then move to a consistent assessment tool, link this to service provision and a case plan and then follow up by evaluating the outcomes.

Chair thanked Ms. Corson, the subcommittee members and staff for their work.

Chair recognized Micah Cox, staff for the Information Sharing (IS) Subcommittee.

Mr. Cox, speaking on behalf of the co-chairs, Cathy Graham and Natalie Auberry, as well as the IS subcommittee gave an update of the accomplishments of this subcommittee. To date they have had one meeting with a second meeting scheduled for July 21, 2004. Two additional subcommittee meetings will be held in August, with the final meeting scheduled for early September.

The original plan was to come present two to three recommendations to the commission. That number has since risen to four recommendations.

The first area of recommendation is to remove false barriers to the information sharing process such as HIPAA and FERPA and to demystify these perceived barriers through training. The second is to define exactly what confidentiality means to each child-serving agency. Thirdly, to discuss the Indiana FERPA exception and to understand the language in this statute. Finally, the subcommittee will review what technology is currently available to enhance information sharing.

Rep. Foley asks who (what parties and systems) need to be working on information sharing.

Nikki Kincaid responds that this issue may come under the false barriers ideal. The issue is not only who needs to know, but there is often a perception of there being a reason, such as FERPA or HIPAA, not to share, instead of a reason to share information.

Chair thanked the subcommittee members and staff for their work.

Chair recognized Joe Fistrovich , Co-Chair of the Integrative Funding (IF) Subcommittee.

Mr. Fistrovich, speaking on behalf of the co-chair, David Reynolds, as well as the IF subcommittee stated that the subcommittee held its first meeting July 12th and recognized that some of the same topics arose from their subcommittee discussion as had been raised in other subcommittees. During the first meeting a Guiding Principles document was developed in draft form. The main themes were that children's needs must drive the delivery of services; fiscal policy should emphasize early intervention, prevention and community-based services; that there should be equity of services throughout the State; payment for services should be based on judicial order for services so their provision will be made in a timely manner. The subcommittee began looking into funding alternatives and whether all available funds are being used, such as Medicaid to provide services. The subcommittee then posed some questions for consideration. If we really are going to talk about change, is it time to consider having one State Agency responsible for services for children? Could the local communities have a "gatekeeper" such as the judge? The group agrees that the best decisions for children and their families are made locally. The state does provide valuable resources; however, "one size does not fit all." Flexibility built into funding would allow the local systems to shape their services. Getting local community buy in by getting their input and allowing them some control would be a good way to attain this. Also, with this approach there would be less likelihood of the

need for an increase in property taxes. Finally, the subcommittee feels strongly that some group, agency, or individual must be in charge of measuring performance tied to funding. Setting overarching goals for the outcomes of services for children which are tied to funding is currently not in place systemically in Indiana. Evidence-based programming is the key. The subcommittee has two additional meetings scheduled for the next two months.

Chair opened floor for discussion.

Rep. Foley asked if this subcommittee has received input from a representative of local county government, such as a county councilman.

Mr. Fistrovich stated he was formerly a county councilman and there is also a county council representative from Allen County on the subcommittee.

The Chair thanked all subcommittees for the work that is being done. The subcommittees are working through their charge from the bigger picture down to the tactical levels and this is greatly needed and appreciated. The Chair and the commission are well-served by the diversity and the expansiveness of representation on the subcommittees.

IV. Presentation:

- **Juvenile Detention Mental Health & Substance Abuse Assessment Project**
William N. Glick, Director, Indiana Juvenile Justice Task Force, Inc.

The Chair introduced Bill Glick, Executive Director of the Indiana Juvenile Justice Task Force, Inc.

Mr. Glick gave an overview of the results of the 2000 Indiana Juvenile Detention Mental Health and Substance Use Assessment project. This project was initiated to identify which mental health and substance abuse services were needed and yet unavailable in the juvenile detention setting as well as to determine how widespread the lack of mental health services was. Indiana was the sixth state to participate in this type of a statewide assessment. Participants in the Indiana survey included thirty community mental health center directors, and seventeen of the twenty-four juvenile detention facility directors in Indiana.

The project was designed to produce an assessment package that could be readily implemented and analyzed so as to determine the status and treatment needs of youth in detention throughout the state. The project utilized the Personality Inventory for Youth (PIY; with permission of Western Psychological Services), an adaptation of the Youth Risk Behavior Survey, and a proprietary demographic survey. All 359 juvenile respondents from 13 juvenile detention facilities remained anonymous to the investigators to help ensure confidentiality and validity.

The Personality Inventory for Youth (PIY) survey instrument was chosen based on three major criteria. The first was the concern surrounding the amount of staff time required to administer the assessment. The PIY required less than one hour to administer. The second concern was the reading level required. The PIY has a third grade reading level requirement. Finally, the minimal requirement for staff intervention/interpretation and the ability for the youth to self report on the assessment were deemed to be critical to the accuracy of the assessment.

Some of the key findings in Indiana of note were the high percentage of positive responses to the question regarding repeated suicidal ideations, which points to the necessity for suicide screenings in detention settings. Other states have experienced many instances of suicide attempts or suicides in detention. Although the number of suicide attempts in Indiana detention facilities is not known, Indiana facilities have not experienced a suicide in several years.

The proportion of residents in this sample responding positively to the questions regarding physical and/or sexual abuse is 30 times higher than what would be expected in the general population. Several studies have demonstrated clear links between child maltreatment and later juvenile delinquency.

Key findings nationally have shown that high rates of mental disorder, substance abuse and multiple co-occurring disorders have been consistently reported among youth incarcerated in juvenile facilities. An ABT Associates study conducted nationwide in 1994 found that 74% of youth in 95 public and private juvenile facilities reported mental health problems during screening. The methodologies vary, but the findings since that time in a number of states were similar: Between 57% and 77% of the youth met the criteria for at least one mental health or substance abuse disorder.

Finally, in all studies, rates of mental health/substance abuse disorder far exceeded those in the general population, i.e., under 25%. In some studies, the rates even exceeded those found in youth in community mental health treatment settings.

The report on this project has been published and Indiana now has definitive data to support the idea that Mental Health and Addictions issues in youth are an enormous, fast growing concern.

Chair expressed her gratitude to Mr. Glick for his presentation and asked what the one message is which he would like the JLC to take away from this presentation.

Mr. Glick responded that he believes it is critical that Indiana work toward increasing appropriate treatment capacity for children with mental health and substance abuse issues. Trained, qualified individuals to provide evidence-based, community-based, home-based services are essential to helping our children.

VI. New Business

Next Meeting:

Date: Wednesday, August 11, 2004

Time: 10:30 a.m. — 12:00 p.m. (Indianapolis Time)

Location: Indiana Government Center South,
Conference Rooms 4 & 5

Meeting adjourned by Chair at 12:05 pm.